SERIAL NO. FILING DATE **CLAIMS ONLY** APPLICANT(S) CLAIMS AFTER AFTER 1st AMENDMENT 2nd AMENDMENT IND. DEP. IND. DEP. AS FILED IND. OEP. IND. DEP. IND. DEP. IND. DEP. TOTAL IND. TOTAL DEP. TOTAL CLAIMS _<u>_</u>, TOTAL IND. _1 _1 _1 TOTAL 14 DEP. 14 TOTAL CLAIMS 14 575 AL **DEC.**

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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